Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	7/10/2008	Address:	BURMA RD
Case #:	<u>33-28641</u>		BLOOMINGTON, IN
County:	MONROE		
Operati	aboratory Seizure (check one) onal Lab cal/Glassware/Equipment (only) ite (only)	Seizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (cbeck all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: OPEN AIR Water Reactive Metal (Lithium): OPEN AIR Anhydrous Ammonia: Hydrochloric Acid Gas Generator(s): Corrosive Acid: Corrosive Base: Other (item and location):			
☐ Yes _ ☑ No *If yes, fax re	er age 18 discovered (check one) (number present) port to Child Protective Services	☐ Ephedrin ☐ Retail/Mo ☑ Other: <u>Til</u>	_
This report is to be faxed to the following agencies that serve the location:			
Health Dep	ment: <u>FIRE DP</u> artment: <u>MONROE CO</u> ection Service:	Fax: <u>HAN</u> Fax: <u>812-</u> 3 Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>J. PATRICK</u> Phone <u>812-332-4411</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for rerention.